

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number		Filing Date			
cancel 1-23							Applicant(s) 10/700270					
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep												
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